

# NEVADA FINANCIAL DISCLOSURE STATEMENT

(Attach additional sheets if necessary.)

**FILE**  
**DEC 23 2004**  
**561**  
**DEAN HELLER**  
**SECRETARY OF STATE**

NAME KERRY T Robinson  
 MAILING ADDRESS PO Box 2442  
 CITY, STATE, ZIP West Wendover NV 89883  
 TELEPHONE 775-664-2767

LENGTH OF RESIDENCE IN NEVADA 12 Years  
 LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE 1 year

NRS 281.571(1)(a)

List all public offices for which this financial disclosure statement is required [NRS 281.571, Subsection 1(g)]:

| Public Office                           | Annual Compensation | Term or Date Appointed | ANNUAL<br>all elected and<br>appointed public<br>officers<br>(no later than Jan. 15<br>each year)<br>NRS<br>281.559(1)(b)<br>281.561(1)(b) | CANDIDATE<br>(no later than<br>the 10 <sup>th</sup> day<br>after the last day<br>to qualify as a<br>candidate)<br>NRS<br>281.561(1)(a) | APPOINTMENT<br>to fill unexpired term<br>of an elected or<br>appointed public<br>officer<br>(within 30 days)<br>NRS<br>281.559(1)(a) |
|---|---------------------|------------------------|--|--|--|
| West Wendover Recreation District Board | \$ 0                |                        | <input checked="" type="checkbox"/>  | <input type="checkbox"/>   | <input type="checkbox"/>   |
|   | \$                  |                        | <input type="checkbox"/>   | <input type="checkbox"/>   | <input type="checkbox"/>   |
|   | \$                  |                        | <input type="checkbox"/>   | <input type="checkbox"/>   | <input type="checkbox"/>   |

List all general sources of income for you and members of your household over 18 years of age [NRS 281.571, Subsection 1(b)]:

|                       | Self                                | Household Member                    |
|-----------------------|-------------------------------------|-------------------------------------|
| Wells Rural Electric  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| Nevada Bank and Trust | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
|                       | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                       | <input type="checkbox"/>            | <input type="checkbox"/>            |
|                       | <input type="checkbox"/>            | <input type="checkbox"/>            |

List each creditor to whom you or a member of your household owes \$5,000 or more [except (1) debt secured by mortgage or deed of trust on real property which is not required to be listed below, and (2) debt for which a security interest in a motor vehicle for personal use was retained by seller] [NRS 281.571, Subsection 1(d)]:

|     | Self                                | Household Member                    |
|-----|-------------------------------------|-------------------------------------|
| N/A | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
|     | <input type="checkbox"/>            | <input type="checkbox"/>            |
|     | <input type="checkbox"/>            | <input type="checkbox"/>            |
|     | <input type="checkbox"/>            | <input type="checkbox"/>            |
|     | <input type="checkbox"/>            | <input type="checkbox"/>            |

List each business entity (i.e., organization or enterprise operated for economic gain, including a proprietorship, partnership, firm, business, trust joint venture, syndicate, corporation or association) with which you or a member of your household is involved as a trustee, beneficiary of a trust, director, officer, owner in whole or in part, limited or general partner, or holder of a class of stock or security representing 1% or more of the total outstanding stock or securities issued by the business entity [NRS 281.571, Subsection 1(f)]:

|     | Self                                | Household Member                    |
|-----|-------------------------------------|-------------------------------------|
| N/A | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
|     | <input type="checkbox"/>            | <input type="checkbox"/>            |
|     | <input type="checkbox"/>            | <input type="checkbox"/>            |
|     | <input type="checkbox"/>            | <input type="checkbox"/>            |
|     | <input type="checkbox"/>            | <input type="checkbox"/>            |

List specific location and particular use of all real estate (other than personal residence): (1) in which you or a member of your household has a legal or beneficial interest; (2) the fair market value of which is \$2,500 or more; and (3) located in this state or an adjacent state [NRS 281.571, Subsection 1(c)]:

| Specific Location                                   | Particular Use |
|---|----------------|
| lots 1, 2 & 3 Block 2 Malad Estates.<br>Bliss Idaho | Recreation     |
|   |                |
|   |                |
|   |                |

List the identity of donor and value of each gift received in excess of an aggregate value of \$200 from a donor during the preceding taxable year [except (1) a gift received from a person who is related to you within the third degree of consanguinity or affinity; and (2) ceremonial gifts received for a birthday, wedding, anniversary, holiday or other ceremonial occasion if the donor does not have a substantial interest in your legislative, administrative, or political action] [NRS 281.571, Subsection 1(e)]:

| Donor | Value of Gift |
|-------|---------------|
| N/A   | \$ 0          |
|       | \$            |
|       | \$            |
|       | \$            |
|       | \$            |

THE INFORMATION I HAVE PROVIDED HEREIN IS ACCURATE AND COMPLETE.

Date: December 20, 2004

Signature: 